



FAX COVER SHEET

TO Attn: OIPE Customer Service
COMPANY USPTO
FAX NUMBER 17037464060
FROM Tracy Druce
DATE 2004-10-12 21:03:55 GMT
RE Application No. 10/709,231 - MISSING PARTS
FILING

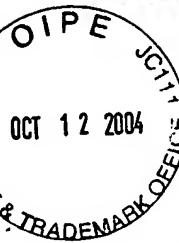
COVER MESSAGE

Please enter the attached which is being provided in response to the Notice To File Missing Parts (9 sheets total). THANK YOU.

- Tracy W. Druce
Ph: 202.293.7333

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/709,231
		Filing Date	04/22/2004
		First Named Inventor	LINDQVIST
		Group Art Unit	1725
		Examiner Name	Not Assigned
Total Number of Pages in This Submission	8	Attorney Docket Number	07589.0163.NPUS01

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Proposed Amended Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Declaration/Power of Attorney - Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	NOVAK DRUCE, LLP Tracy W. Druce
Date	10/12/2004

CERTIFICATE OF TRANSMISSION	
I hereby certify that this correspondence and any documents referred to herein are being facsimile transmitted to Attn: OIPE, Customer Service, USPTO, Arlington, VA. at fax no. 703.746.4060 on: <u>10/12/2004</u>	
Typed or printed name	Daniel Hernandez
Signature	
Date	10/12/2004

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PTO/SB/17 (10-01)

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FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1280

Complete if Known	
Application Number	10/709,231
Filing Date	04/22/2004
First Named Inventor	LINDQVIST
Examiner Name	Not Assigned
Group / Art Unit	1725
Attorney Docket No.	07589.0163.NPUS01

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Other None
 Deposit Account:

Deposit Account Number

141437

Deposit Account Name

NOVAK DRUCE, LLP

The Commissioner is authorized to: (check all that apply)
 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee
 to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	790
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)				(\$ 790)	

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid
40	-20*	-	20	18	360
			0	0	0

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	280	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$ 360)	

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205	85
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	400	216	200
117	920	217	480
118	1,440	218	720
128	1,960	228	980
119	320	219	160
120	320	220	160
121	280	221	140
138	1,510	138	1,510
140	110	240	55
141	1,280	241	640
142	1,280	242	640
143	480	243	230
144	620	244	310
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	740	246	370
149	740	249	370
179	740	279	370
169	900	169	900

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 130)

SUBMITTED BY

Name (Print/Type)	Tracy W. Druce	Registration No. Attorney/Agent	35,493	Telephone	202.293.7333
Signature	<i>Tracy Druce</i>			Date	10/12/2004

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 Alexandria, Virginia 22313-1450
 www.uspto.gov

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/709,231	04/22/2004	Joachim Lindqvist	07589.0163.NPUS01

28694
 TRACY W. DRUCE, ESQ.
 1496 EVANS FARM DR
 MCLEAN, VA 22101

CONFIRMATION NO. 1741
 FORMALITIES LETTER

OC000000013494260

Date Mailed: 08/11/2004



NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted***Items Required To Avoid Abandonment:**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 770 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of \$360 as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$1260 for a Large Entity

- \$770 Statutory basic filing fee.

10/14/2004 JBALINAN \$130 late oath or declaration Surcharge.

01 FC:1001	790.00 OP
02 FC:1202	360.00 OP
03 FC:1051	130.00 OP

Page 2 of 2

- Total additional claim fee(s) for this application is \$360
 - \$360 for 20 total claims over 20.

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*

Z. Araya
Customer Service Center
Initial Patent Examination Division (703) 308-1202
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